

FH-21
Rev. 10/68U. S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
FEDERAL HOUSING ADMINISTRATIONForm Approved
OMB No. 63-R0337**APPLICATION FOR TITLE I CONTRACT OF INSURANCE**
TITLE I, SECTION 2 NATIONAL HOUSING ACTFEDERAL HOUSING COMMISSIONER
WASHINGTON, D.C. 20411

Date _____ 19__

We hereby apply for a Contract of Insurance with respect to Property Improvement Loans under the provisions of Title I, Section 2 of the National Housing Act, as amended, and the Regulations of the Federal Housing Commissioner issued thereunder. We submit the following information on our qualifications, including the exhibits attached, (See item 12) as set forth on the reverse side, incorporated in and made a part hereof:

1. Name (Exact Corporate Title)

2. Type of Institution (Check Applicable Box)

0. ☐ Federal Credit Union1. ☐ National Bank2. ☐ State Bank3. ☐ Savings Bank4. ☐ Savings & Loan Association5. ☐ State Chartered Credit Union6. ☐ Finance Company7. ☐ Other _____
(Specify)

3. Date Organized

4. Incorporated under laws of:

5. Member of:

☐ Federal Deposit
Insurance Corporation☐ Federal Home
Loan Bank System☐ Federal Reserve System☐ Federal Savings & Loan
Insurance CorporationIf not a member of the stated, we are under
the supervision of: _____

6. Trading Radius within which loans will be originated or serviced (maximum mileage from your lending office)

7. List Branch Offices originating or servicing these loans (State which)

8. We propose to: (Check one or both)

☐ Make loans direct to Borrower☐ Purchase notes from Dealer

10. Our main office telephone No. (area code, number, extension)

9. We propose to: (Check one or both)

☐ Hold notes for our own account☐ Sell notes to: _____

11.

☐ PLACE OUR NAME ON THE FHA PROPERTY IMPROVEMENT LOAN MAILING LIST.

Signature

BY:

Title of Officer

Address of Institution (Number & Street)

City, State and Zip Code

(SEE REVERSE SIDE FOR REQUIRED EXHIBITS)

FH-21 Rev. 10/68

12. We submit the following exhibits as part of our application:

- (a) A detailed statement of our proposed policy and procedures for making FHA insured property improvement loans.
- (b) A detailed statement of our proposed policy and procedures in purchasing dealer paper including methods of determining that the dealer is reliable, financially responsible and qualified to perform satisfactorily the work to be financed and to extend proper service to the customer.
- (c) A statement setting forth in detail the collection procedures to be employed for FHA insured property improvement loans.
- (d) A resume of the consumer credit lending experience of the officer to be in charge of making these loans.
- (e) A copy of our most recent financial statement (not over 6 months old).
- (f) A copy of the note form we propose to use on Title I loans.

If your institution is not subject to federal or state supervision, the following exhibits are also required:

- (g) A detailed audit of our books made by an independent accountant, not in our own employ, certified by an officer of our company, showing an acceptable corporate net worth.
- (h) A letter or letters from banking institutions setting forth amount of credit available for FHA property improvement loan financing.

NOTE:

If notes will be sold give full details, to whom, on what basis or arrangements, and if written agreements have been executed, send two copies in each case as an additional exhibit.

Forward original application and required exhibits to the Director of the FHA Insuring Office for your area.

FH-13
Rev. 8/62U. S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
FEDERAL HOUSING ADMINISTRATIONForm Approved
Budget Bureau No. 63-R0844PHA Title I Loan Program (Property Improvement Loans)
DEALER-CONTRACTOR APPLICATION

INSTRUCTIONS: Submit one copy to each financial institution with which you expect to discount notes.

TO: (Insured Institution)

Date

As provided in Section 201.8(a)(1) of the Regulations issued by the Federal Housing Commissioner under Title I of the National Housing Act, this application is submitted for your approval as a Dealer-Contractor.

Trade Name	Phone Number	Ownership <input type="checkbox"/> INDIVIDUAL
Number and Street	Date Business Established	<input type="checkbox"/> PARTNERSHIP
City, Zone, State	Years at Present Address	<input type="checkbox"/> CORPORATION
Previous Address	Years at Previous Address	Number of Salesmen
Type of Business (General Contracting, Lumber Yard, Heating, etc.)	Date Financial Statement	Identify Salesmen on Separate Attached Sheet

IF PARTNERSHIP OR CORPORATION, IDENTIFY PRINCIPALS

Name	Title	Home Address
1.		
2.		
3.		

EMPLOYMENT HISTORY OF PRINCIPALS FOR PAST TEN YEARS (If more space is needed, use an attached sheet)

Name of Principal, Capacity, and Dates Employed	Names and Addresses of Employers	Type of Business
1.		
2.		
3.		

Bank of Deposit

FINANCIAL INSTITUTION(S) DISCOUNTING PAPER:

Name	Address	PERCENT	
		Year	Year

FH-13 Rev. 8/62

APPENDIX 1

TRADE REFERENCES: (NAME SUPPLIERS OF MAJOR PRODUCTS FINANCED WITH TITLE I LOANS)

Name	Address

If paper to be financed represents the sale of a specialty product, give trade name and manufacturer (Attach descriptive literature and price list.)

Sales Area	No. of Branches
Addresses of Branches	

Describe any Guaranty Given Buyers

I (we) hereby understand that I (we) am (are) fully responsible for the Title I activity of all my (our) sales personnel, that ethical and proper selling practices will be followed, and that immediate attention will be given to all complaints involving materials, workmanship or sales representation.

I (we) hereby certify that the above statements are true. I (we) understand this application shall remain the property of the financial institution to which it is submitted and, if requested, a copy may be furnished to the FHA.

Trade Name	By: (Name and Title)
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WARNING

Any person who knowingly makes a false statement or a misrepresentation in this application shall be subject to a fine of not more than \$5,000 or to imprisonment for not more than 2 years, or both, under provisions of the United States Criminal Code.

FOR USE OF DEALER- CONTRACTOR FOR SUPPLYING ADDITIONAL INFORMATION

FOR USE OF INSURED INSTITUTION

<input type="checkbox"/> CREDIT REPORT ATTACHED	<input type="checkbox"/> REFERENCES CHECKED	<input type="checkbox"/> PREVIOUS LENDERS CHECKED	<input type="checkbox"/> SALES LITERATURE RECEIVED
REPORT DATED: ()	<input type="checkbox"/> FIRM, ALL PRINCIPALS AND SALESMEN CHECKED AGAINST PRECAUTIONARY LIST	<input type="checkbox"/> COPY OF CONTRACT OR SALES AGREEMENT REC'D	<input type="checkbox"/> APPLICANT GIVEN COPY OF DEALER-CONTRACTOR GUIDE
Place of Business Inspected By: (Name and Title)			Date Inspected

Remarks:

The dealer-contractor whose application appears hereon has been approved after such investigations as we consider necessary to establish that the dealer-contractor is reliable, financially responsible and qualified to perform satisfactorily the work to be financed and to extend proper service to the customer.

Dealer-Contractor Approved (Date)	By: (Name and Title)
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GPO 878-126

FH-13 Rev. 8/83

-8-

9. PROPERTY TO BE IMPROVED.

Is this a new residential structure? ☐ Yes ☒ No

If Yes, has it been completed and occupied for 90 days or longer? ☐ Yes ☒ No

Address (Number, Street, City, State and ZIP Code):
123 ASH STREET
WASHINGTON, DC 20000

Type - Home, Apt., Store, Farm, etc., (If Apt., Number of Units):
HOME

FILL IN ONE

Is Owned by (Fill in One)	Payments made to	Purchase price	Date of Purchase
<u>JOHN & MARY SMITH</u>	<u>AMERICAN MORTGAGE</u>	<u>24,000</u> Balance Owed <u>4,200.</u>	<u>MAY 1965</u>
Is Leased by (Fill in One)	Payments made to	Monthly payment	Lease Expiration

Year Built: 1959

NOTICE
 If this structure was built before 1950, it may contain lead-based paint which, if eaten, may cause mental retardation, blindness, paralysis, or even death. Symptoms may include stomach aches, vomiting, headaches, a loss of appetite, crankiness or frequent dizziness. A child who has any of these symptoms or who is suspected of having eaten lead-based paint should be taken immediately to your local doctor, clinic, or hospital for screening and treatment. The best way to prevent lead-based paint poisoning is to keep your home in good shape and to assure the removal of any immediate lead-based paint hazards. Once the hazards have been removed, the walls should then be repainted with two coats of an unleaded paint. For detailed information on the prevention and elimination of lead-based paint hazards, please contact your local HUD office for a free pamphlet entitled "Lead Poisoning: Watch Out for Lead-Based Paint."

10. PROCEEDS OF THIS LOAN WILL BE USED TO IMPROVE THE DESCRIBED PROPERTY AS FOLLOWS:

Describe each improvement planned	Name and Address of Contractor/Dealer	Estimated Cost
<u>BUILD ADDITIONAL ROOM</u>	<u>LOAN HOME IMPROVEMENT CO.</u> <u>WASHINGTON, D.C.</u>	<u>4,600.-</u>
<u>NEW HEATING SYSTEM</u>	<u>"</u>	<u>1,400.-</u>

NOTICE

If any of the above improvements include "built in kitchen appliances" or "hardwood" certificates numbered 801 and 802 respectively must be completed by the borrower and the dealer or seller. These certificates are required on both direct and dealer loans.

WARNING

Any person who knowingly makes a false statement or a misrepresentation in this application or causes such a false statement or misrepresentation to be made shall be subject to a fine of not more than \$5000 or by imprisonment for not more than 2 years, or both, under provisions of the United States Criminal Code.

IMPORTANT - APPLICANT READ BEFORE SIGNING

The selection of a Contractor or Dealer, acceptance of materials used, and work performed is your responsibility. Neither the HUD-FHA nor the Financial Institution guarantees the material or workmanship or inspects the work performed.

1 (We) certify that the above statements are true, accurate, and complete to the best of my (our) knowledge and belief. This application shall remain the property of the Lending Institution to which submitted for the purpose of obtaining a loan.

2 (We) hereby consent to and authorize the Lending Institution or the HUD-FHA, after the giving of reasonable notice, to enter the improved property for the purpose of determining that the improvements specified in this application have been completed.

Name: John Smith (Applicant) (LS) Name: Mary Smith (Co-Applicant) (LS)

NOTE TO SALESPERSON: If proceeds will be disbursed to the Contractor/Dealer, the person(s) selling the above described improvements must sign the following certification.

1 (We) certify that: 1) I (We) am (are) the person(s) who sold the job; 2) The Contract contains the whole agreement with the borrower; 3) The borrower has not been given or promised a cash payment or rebate nor has it been represented to the borrower that he or she will receive a cash bonus or commission on future sales as an inducement for the consummation of this transaction; that the improvements have not been misrepresented; no promises impossible of attainment; no encouragement of "buy" purchase; no promise that the improvements will be used as a model for advertising or other demonstration purposes; and no offer of debt consolidation.

(LS) Name: Joe Brown (If true name and signature are as shown above)

If application is prepared by one other than the applicant, the person preparing the application must sign below.

1 (We) certify that the statements made herein are based upon information given to me (us) by the borrower(s) and are accurate to the best of my (our) knowledge and belief.

Prepared By: _____ Address: _____

Representing: _____

(Reserved for use of Lending Institution):

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
HOUSING - FEDERAL HOUSING COMMISSIONER

REQUEST FOR EXTENSION OF TITLE I CLAIM PERIOD

No extension of maximum claim period will be granted unless a completed request for such extension is received within the allowable claim period (24 CFR 201.11 (c) and 24 CFR 201.665 (b)), but a claim for loss on such a loan may still be submitted to HUD. Such claims are referred to the Commissioner's Committee on Substantial Compliance, which on the basis of the circumstances, determines whether they may be paid.

PART I - TO BE COMPLETED BY LENDING INSTITUTION

EXTENSION REQUESTED <input type="checkbox"/> 3 Mos. <input type="checkbox"/> 6 Mos. <input type="checkbox"/> 9 Mos. <input type="checkbox"/> 1 Yr.		DATE OF NOTE
TO: DIRECTOR, OFFICE OF TITLE I INSURED LOANS DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT, FHA WASHINGTON, D. C. 20410 ATTN: TITLE I OPERATIONS DIVISION		FACE AMOUNT OF NOTE
		MATURITY DATE
		BALANCE OWING
NAME(S) OF BORROWER		TERMS <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Monthly <input type="checkbox"/> Annual
REASON(S) FOR DEFAULT AND EXTENSION REQUEST Date of default if manufactured housing (Mobile Home) loan _____		NUMBER OF MONTHS OF PREVIOUS EXTENSIONS GRANTED
<div style="border: 1px solid black; height: 100px; width: 100%;"></div>		NOTE Type the full name and address of your institution in the address area to the left. This address will be used to return the form to you approving your request for an extension of the allowable claim period for this loan.
DATE OF REQUEST	REQUESTING OFFICIAL (Signature and Title)	

PART II - FOR HUD USE

We hereby grant the extension requested above. DATE:	APPROVING OFFICIAL (Signature and Title)
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Replaces Form FHA-299,
which may be used until supply is exhausted

HUD-9299 (9-80)

[illegible]